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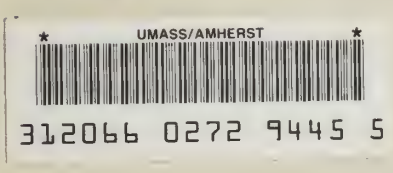

Massachusetts WIC Program

STATE PLAN

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(Section I:)

1990

State Agency

Goals and Objectives

MASSACHUSETTS WIC PROGRAM GOALS AND OBJECTIVES

INTRODUCTION

A federal program supplemented by state funds, the Massachusetts WIC Program provides nutrition education and counseling, makes health care and social service referrals, and distributes vouchers for nutritious foods to low-income pregnant and postpartum women, infants and young children certified as medically or nutritionally at risk. In carrying out these program mandates, WIC works in collaboration with health care providers and other health and human service agencies to provide coordinated and comprehensive services to families in need. WIC is proven effective in reducing infant mortality and morbidity and in improving participant health outcomes.

The Massachusetts WIC Program functions as part of the Department of Public Health which has been reorganized recently to enable greater cohesiveness, coordination and accountability of Department services. The Department operates through three major programmatic sections, each headed by a Deputy Commissioner: Environmental and Biological Sciences, Health Promotion, and Health Services. WIC is a division within Health Promotion. As such, WIC communicates and works directly with other maternal and child health programs which are part of Health Promotion: the Bureau of Parent, Child and Adolescent Health, particularly its Healthy Start, Office of Nutrition, Maternal and Child Health, Adolescent Services and Early Childhood programs and the Division of Community Health Centers with its Primary Care, Maternal Infant Care, and Children and Youth programs. The Program also collaborates with the Division of Substance Abuse Services on drug and alcohol issues affecting women and children. Strong intra-agency networking and lateral communication through the Department's matrix organization and committees on key initiatives - such as infant mortality and adolescent services - ensures integrated policy development, planning and program implementation.

A statewide network of 35 local programs with 100 sites and 785 retail stores in communities across the Commonwealth supports WIC Program activities. Quality nutrition services, focused on individual service needs, form the centerpiece of the Program, and particular emphasis is placed on providing services to high risk populations, including prenatal and breastfeeding women, medically at-risk infants and children, members of ethnic minority groups, new immigrants, and pregnant adolescents. This participant focus is buttressed by the involvement of the multi-faceted Massachusetts WIC community - local agency and program staff, Advisory Council members, participants and advocates - with the state agency in identifying problems, developing solutions and affecting program improvement. WIC must also maintain a computer system to produce and account for over 300,000 vouchers a month and a banking services contract to process and reconcile the vouchers. Regulations and monitoring and evaluation requirements are a critical component of WIC program operations.

Now at a monthly level of 73,850 participants, services are at operational and funded capacity; maintenance of service levels is dependent on increases in productivity, and increases in service are dependent on the addition of new local program staff and space as well as the rate of inflation in WIC food costs.

Fiscal Year 1990 Goals and Objectives

Massachusetts WIC's overall focus for FY 90 is to stabilize program operations and improve program capacity and management systems in order to provide services to the greatest number of eligible persons within the constraints of available funding for WIC foods and nutrition services and operations. Initiatives are planned to emphasize:

- o Enhancing nutrition and health education activities, particularly to ethnic and cultural minorities.
- o Expanding coordination and referral mechanisms with other health programs.
- o Enhancing outreach activities to pregnant women and other high-risk eligible individuals.
- o Improving mangement systems throughout the program.
- o Improving service capacity at local programs.
- o Enhancing food cost management systems.

Priority activities in FY 90 include 1) increasing the number of Priority 1 participants on WIC through a special outreach campaign and local program incentives, 2) coordinating activities with the Departments of Public Health and Public Welfare and other health programs with regard to staff education and referral mechanisms, particularly substance abuse, AIDS and Medicaid services, 3) ensuring the provision of culturally-appropriate nutrition education, 4) continuing the development and implementation of a new management information system, 5) following up on the implementation of the infant formula price enhancement system and other food cost savings activities, as well as investigating other competitive bid systems, and 6) increasing and improving retail store and WIC voucher processes.

The goal for state FY 90 statewide monthly participation is approximately 73,850 individuals, to be jointly funded by federal and supplmental state funds. Dependent on the rate of inflation and levels of federal funding, monthly participation and food cost savings, this goal will be reassessed mid-year. Services and benefits should be provided to:

- - 14,655 women, 18,347 infants, and 40,848 children
- - 49.9% of the eligible population (based on a March, 1987 estimate of 148,059 eligibles).

This number includes approximately 56,508 participants to be served with federal funds. This caseload is based on the following assumptions:

- o a 5.0% increase in the federal allocation for food
- o a 2.25% increase in the federal allocation for nutrition services and operations
- o a 7.5% increase in cost of the average food package.

If any of these factors changes, an adjustment will be made in the number of participants to be served each month.

REVIEW OF FISCAL YEAR 1989 GOALS AND OBJECTIVES

During FY 89, Massachusetts WIC Program's overall goal was to improve program operations in order to maintain and improve the level and cost-effectiveness of services and benefits to a maximum number of eligible Massachusetts residents as determined by available funds. Program activities toward this goal were aided by additional funds from the United States Department of Agriculture. Program highlights include:

- o Caseload Expansion

  As a result of additional assigned caseload and new staff hired at local programs with federal funds, active participation increased steadily each month during FY 89 and reached the FY 89 assigned caseload level of 73,850 participants per month during the winter. Strong demand for WIC services due to increased numbers of prenatals and economic conditions resulted in active caseload increasing beyond assigned levels. Because of unprecedented food cost inflation, active participation is now managed down. Program participation reflected continued emphasis on high risk, minority populations: nearly 70% of Massachusetts WIC participants are in Priorities 1-3 and 53% are members of minority groups.

- o Local Program Capacity

  As part of the ongoing initiative to more adequately fund local WIC programs, local program service capacity was improved in FY 89. In addition to the 3,500 cases added to statewide to local program assignments in January, full-time staff was augmented by fifteen persons and existing staff salaries were improved. Average funding per participant increased by $5.52 to $106.02 for FY'90 contracts as total local program contract dollars increased $525,930.

- o Bimonthly Voucher Distribution

  After extensive planning, training and computer programming, distribution of vouchers on an every other month basis was implemented on June 1, 1989. This initiative increases participant access to WIC services as well as streamlines local program operations.

- o Culturally Appropriate Nutrition Education

  Information and training on the nutrition needs of high risk ethnic and minority groups was provided to local programs through presentations and seminars about cultural food practices and health education. Targeted ethnic groups included Puerto Ricans, Southeast Asians, Blacks, Azorians and Cape Verdians, Haitians, and Latinos. WIC served approximately 19,600 Hispanics, 6,000 Asian/Pacifics, and 14,700 Blacks in FY 89.

- Infant Formula Price Enhancement System

  The Infant Formula Price Enhancement System was implemented on May 1, 1989 with the start of a contract to purchase all standard infant formula from Mead Johnson Nutritionals. Due to high food cost inflation in FY 89, the recycled federal funds will pay for services to a significant number of participants currently on WIC. This project consumed tremendous WIC staff resources in FY 89. Activities included an extensive public hearing process, the writing and submitting of an invitation to bid, review and selection of bids, and education of participants, physicians, referral agencies, and vendors.

- Banking Services Contract

  The new contract for WIC banking services took effect on October 1, 1988. This new contract improves WIC banking by integrating services and expanding the Program's ability to monitor voucher and vendor activities.

- Farmers' Market Coupon Demonstration Project

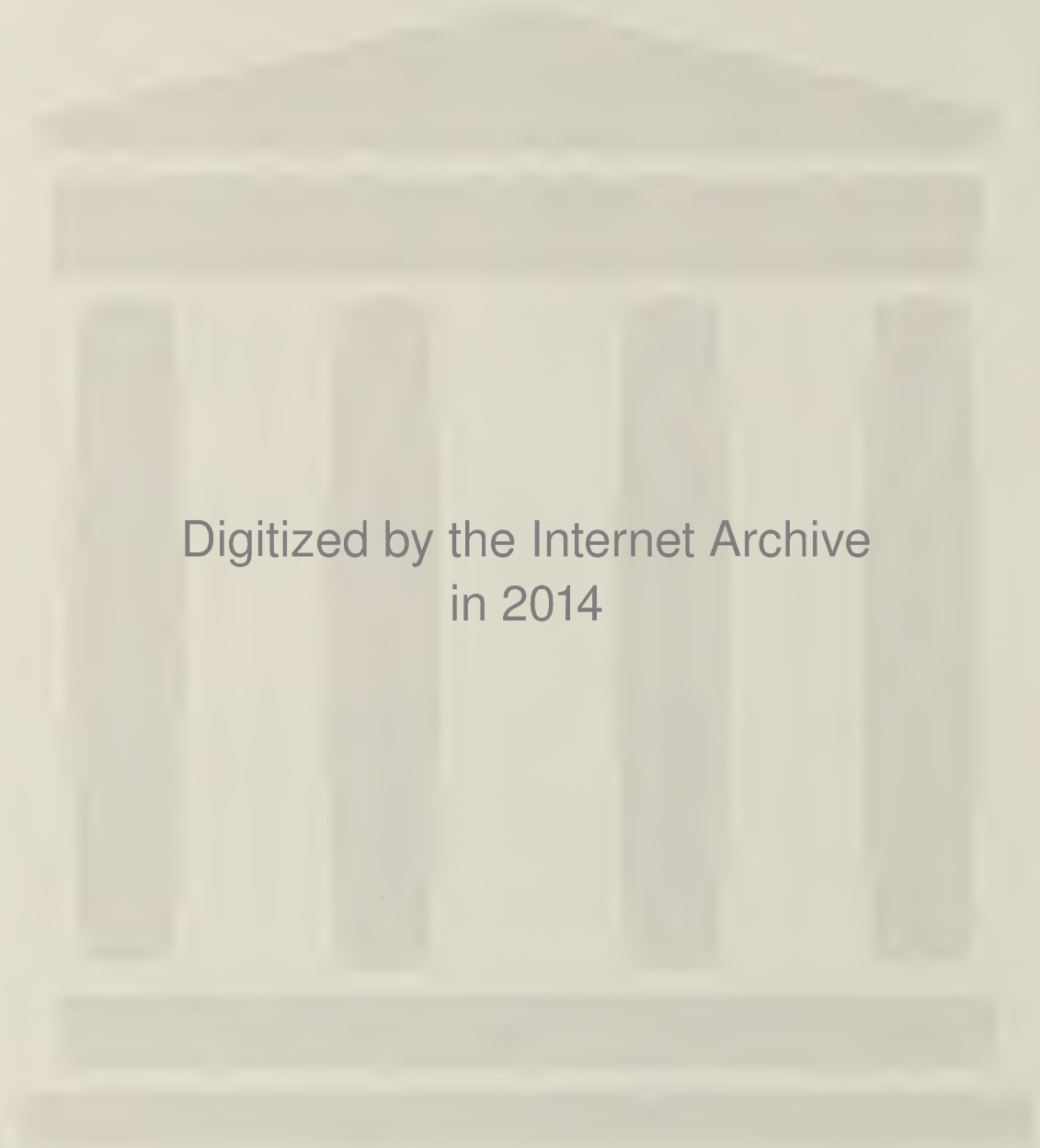
  As part of a coordinated effort with the Massachusetts Department of Food and Agriculture, approximately 17,000 WIC families at fourteen local WIC programs were provided with $10 worth of coupons redeemable for fresh produce at twenty two community farmers' markets.

- New WIC EDP System

  The state Request for Proposal and federal Systems Project Plan received state and federal approval to proceed; a contract is expected to be finalized in 1989. For FY 89, USDA allocated $100,000 in discretionary funds and additional operational funds were budgeted for this project, implementation of and expenditures for which will be phased in over three years. Phase I of the MIS is nearly complete, with all local programs having received microcomputers and training and use of participant and vendor data entry screens to be implemented by the fall.

  The proposed design is for a decentralized distributed system which intregates the State mainframe with local program microcomputers and has the capability to print food vouchers at local WIC programs. The new system will streamline local program operations, improve the accuracy, accountability and timeliness of WIC vouchers, and generate data consistent with the statewide nutrition surveillance system.

  The result will be expanded capacity to serve greater number of eligible participants as well as improved healthcare planning and management systems.



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- Vendor Compliance

  WIC staff carried out a major initiative to investigate and disqualify food vendors abusing the WIC Program. Fair hearings were held for 9 vendors of the 17 who were disqualified in July 1988; all of the WIC Program's decisions were upheld. An additional 40 vendors were investigated, and 9 were disqualified. Another 12 disqualifications are underway (as of July 1989). Staff recovered funds totalling $57,400.29 from disqualified vendors.

- AIDS Education

  An AIDS education initiative to provide local WIC Programs with needed information and materials was developed and implemented. AIDS activities included 1) provision of AIDS public information and educational materials including the CDC recommendations on prevention of HIV transmission and posters on prevention of infection from blood, 2) two inservices for local program staff, and 3) development of a WIC policy on AIDS/HIV documentation and confidentiality issues.

- Food Package Savings

  To offset significant food cost inflation and to avoid disruption in participant services, the Massachusetts WIC Program undertook a number of WIC voucher message and food package changes. These changes were developed with the input and support of local WIC programs and with information on retail store prices for WIC food items. In order to refrain from eliminating a single food item, staff from Nutrition, Program, Food Delivery, Systems and Fiscal developed a list of multiple ways to reduce food costs, including cutting some higher priced items from the food package, refining tailoring in manual food voucher packages, and urging participants to buy wisely.